

Office of the Ombudsman for the
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James McCracken
Ombudsman

The Office of the Ombudsman for the Institutionalized Elderly (O.O.I.E) works to preserve the health, safety, welfare and protect the rights of New Jersey residents age 60 and older who live in long-term health care facilities. The program seeks to ensure that residents receive quality care as they age. The Office is in, but is independent of, the NJ Department of the Treasury.

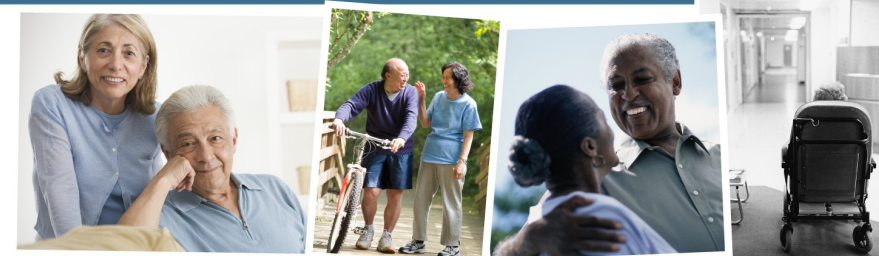
Inspire Healthy Aging With This New Documentary

- Your New Jersey Ombudsman invites you to share the award-winning documentary *Age of Champions* with your community.
- Age of Champions* is the story of five competitors who sprint, leap, and swim for gold at the National Senior Olympics. You'll meet a 100-year-old tennis champion, 86-year-old pole vaulter, and rough-and-tumble basketball grandmothers as they triumph over the limitations of age.
- Sharing the film with your community is a powerful way to inspire your members, engage your staff, and support your organization's mission. More than 500 senior residences are already using the film to enrich their programs and promote the message of lifelong health and wellness.
- Sign up now to purchase the *Age of Champions Screening Kit*, which includes the DVD, discussion guide, promotional materials, and fun giveaways for your audience. Enter the discount code "ombudsman" and save 10% on your order.
- Watch the trailer and learn more at www.ageofchampions.org/Ombudsman.

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Guidance. Support. Advocacy.



October 2012 | Volume 1, Issue 3

The Beacon *News from New Jersey's Long-Term Care Ombudsman*



Dear Colleagues:

The fall is a busy time for those of us in the elder advocacy community. This is especially true because October is Residents' Rights Month, an annual event designated by the National Consumer Voice for Quality Long Term Care to honor residents living in all long-term care communities.

This October, the Ombudsman's office is travelling to several long-term care communities throughout the state to meet with residents and educate them about their rights as delineated in both the federal and the New Jersey Nursing Home Bill of Rights. In order to make this information both instructive and entertaining, we will be playing "Residents' Rights Bingo", which was developed by Mighty Rights Press, a Division of The Legal Center for People with Disabilities and Older People.

We are also committing additional outreach resources to another area of significant concern to the health care community: advance care planning.

Elizabeth Speidel, OOIE Director of Policy and Legislative Affairs, has developed a presentation that provides specific information on advance care planning tools and how important it is for people to have conversations with their loved ones about end-of-life care or other medical decision-making issues. Elizabeth is available to speak to organizations interested in learning more about this topic. For more information, contact the OOIE outreach office at 609-826-5073.

This issue of **The Beacon** also includes a wonderful interview with leaders of two Regional Ethics Committees, groups of dedicated health care professionals who volunteer their time helping long-term care communities resolve complex bio-medical ethical issues. TREC serves Burlington, Camden, and Gloucester. OREC serves Northern Ocean County. Both of these groups do an amazing job.

Finally, I hope you take a moment to read about one of our stellar volunteers, Jim Vine. Jim, like so many of our volunteers, is extremely dedicated to providing advocacy, friendship and comfort to people living in long-term care. Jim was motivated to become a volunteer because of his late wife, Susie, whom he describes as "the quintessential giver".

Our volunteers are the definition of "givers". They give their time, their patience, their talents and their energies to making life better for elderly people living in long-term care. I am endlessly amazed and awed by their commitment to the people we serve.

I hope you enjoy this issue of **The Beacon**, and enjoy a happy and healthy autumn.

James W. McCracken
James W. McCracken

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Dates to Remember

October

- National Residents Rights Month
- 13 World Hospice and Palliative Care Day

November

- National Hospice and Palliative Care Month
- National Alzheimer's Disease Awareness Month
- 6 Election Day
- 11 Veteran's Day
- 22 Thanksgiving Day

“If wrinkles must be written upon our brows, let them not be written upon the heart. The spirit should not grow old.”~ *James A. Garfield*

Education and Outreach on Elder Abuse Awareness

OOIE acknowledges World Elder Abuse Awareness Day 2012



Ombudsman McCracken addresses concerns regarding elder abuse with residents and staff at Bristol Glen Continuing Care Retirement Community.

Friday, June 15, was World Elder Abuse Awareness Day, a day created in 2006 to focus attention on elder abuse and exploitation.

In honor of World Elder Abuse Awareness Day, Ombudsman James W. McCracken visited Bristol Glen Continuing Care Retirement Community and attended an event at the Ramada Toms River for residents of the communities of Green Acres Manor and Magnolia Gardens. The purpose of these visits was to help raise awareness of elder abuse and provide residents, family members and members of the public with information that they need to combat abuse, neglect and exploitation of vulnerable older adults.

OOIE is a resident-focused advocacy program that seeks to protect the health, safety, welfare, and civil and human rights of older individuals who live in long-

term care facilities. We receive about 6,000 complaints of abuse, neglect or exploitation in long-term care facilities such as nursing homes, assisted living, boarding homes, and residential health care providers.

The message that McCracken delivered at these events and in a letter to the editor published in several major daily newspapers is that, while awareness of an issue is important, action is even more important.

Becoming a volunteer advocate is one way to combat elder abuse and to make a meaningful difference in the lives of elderly residents living in a nursing home. Volunteer advocates receive 32 hours of training and are asked to spend four hours a week at a local nursing home, listening to residents' concerns and advocating on their behalf. To become a volunteer, call the OOIE Volunteer Advocate Program at 609-826-5053.

As Ombudsman McCracken always says: The need is clearly there — will you answer the call?

The OOIE Volunteer Advocate Program was barraged with about 150 calls in June after several newspapers published a letter to the editor by Ombudsman James W. McCracken urging people to get involved in the fight against elder abuse by becoming a volunteer advocate. In response to these inquiries, Regional Coordinator Janet Khanlian put together a revamped group training for interested volunteers at OOIE headquarters in Trenton. Most of the advocate trainees were from the southern New Jersey area, where Khanlian recently became Regional Volunteer Coordinator. These volunteers were joined by some volunteers from the central and central coastal counties managed by Regional Coordinator Beth Mane, who also contributed to the training.



VAP Trainees participate in cognitive impairment activities. Taped gloves are used to reduce tactile sensitivity and manual dexterity.

“To keep the heart unwrinkled, to be hopeful, kindly, cheerful, reverent that is to triumph over old age.”~*Thomas B. Aldrich*

Long-Term Care Residents Honored During Residents' Rights Month, October 2012

My Voice, My Vote, My Right

Residents' Rights Month is an annual event designated by the National Consumer Voice for Quality Long Term Care. It is celebrated in October to honor residents living in all long-term care facilities, including nursing homes, sub-acute units, assisted living, and board and care and retirement communities. It is a time for celebration and recognition offering an opportunity for every facility to focus on and celebrate awareness of dignity, respect and the value of each individual resident.

The theme for this year - “My Voice, My Vote, My Right” - focuses on the right of institutionalized seniors to vote.

The Nursing Home Reform Law, passed in 1987, guarantees nursing home residents their individual rights, including but not limited to: individualized care, respect, dignity, the right to visitation, the right to privacy, the right to complain, and the right to make independent choices. Residents' Rights Month raises awareness about these rights and pays tribute to the unique contributions of long-term residents. OOIE will be facilitating Residents' Rights celebrations in several New Jersey long-term care communities throughout the month. Events will consist of games and discussions regarding resident-focused topics like knowing their rights, elder abuse, advance care planning and healthy aging. This month highlights the importance of listening to and empowering New Jersey residents who live in our state's nursing homes, assisted living and board and care communities.



Residents of Hamilton Continuing Care Center enjoy a game of Residents' Rights Bingo as OOIE staff Amy Brown and Deirdre Mraw facilitate the game.



Resident, Regina Matyi of Hamilton Continuing Care Center smiles after winning a OOIE gift basket during Residents' Rights Bingo.

OBITUARY

The OOIE is sorry to announce the passing of long-time volunteer advocate Stanley Fox, 86, on August 21, 2012. Stanley was the Advocate at Maple Glen in Fair Lawn, Bergen County, and attended all of the regional quarterly meetings and was very outgoing and outspoken. Stanley often said he felt lucky to be healthy enough to give back to other seniors who were not so fortunate. Our deepest condolences to Stanley's friends and family, he will be sorely missed.

“Anyone who stops learning is old, whether at 20 or 80. Anyone who keeps learning stays young. The greatest thing in life is to keep your mind young.” ~Henry Ford

OOIE Training Conference for Staff and Volunteers

First-ever event draws 100-plus volunteers, special guests

More than 125 advocates and OOIE staff attended the 1st Annual Volunteer Ombudsman Training Conference and Volunteer Recognition Luncheon at the Hyatt Regency New Brunswick on May 23, 2012. The event assembled advocates throughout New Jersey’s 21 counties to participate in an interactive, interesting, and informative training. James W. McCracken, Ombudsman, welcomed the



OOIE volunteers participate in a role-playing activity designed to enrich their advocacy skills at the OOIE first-annual Volunteer

On the day before the volunteer training conference and luncheon, OOIE staff participated in an intensive all-day training with Hunt and Smetanka that focused on: the history of ombudsman programs nationally; issues relating to confidentiality and consent; how to advocate for people with dementia; identifying the misuse of anti-psychotic drugs; the re-authorization of the Older American’s Act; the impact of the Affordable Care Act on ombudsman programs; and emerging advocacy trends. Later in the day, Hunt and Smetanka reviewed case studies with the staff that focused on common types of problems including: guardianship; residents leaving LTC against medical advice; resident sexuality; transfers and discharges; and behavioral health issues.

In addition, Hilary Meyer, Director of the National Resource Center on LGBT Aging, presented on the challenges of protecting the rights of people who are Lesbian, Gay, Bisexual and/or Transgender living in long-term care communities. The National Resource Center on LGBT Aging is available to provide trainings on LGBT aging issues and best practices. Information can be found at www.lgbtagingcenter.org.

participants and thanked them for their continued support to New Jersey’s vulnerable elderly in long-term care facilities. Speakers also included Lori Smetanka, Director, and Sara Hunt, Consultant, from the National Ombudsman Resource Center (NORC) in Washington, D.C., who presented on interactive role playing and skills for effective listening. Paul Greenwood, Esq., from the San Diego District Attorney’s Office, tackled the seriousness of elder abuse in a way that entertained, educated and motivated the audience. Teri Cox, Volunteer Caregiver and Advocacy Consultant, presented on the rewards of volunteering. Special guests included: Lowell Arye, Deputy Commissioner, NJ Department of Human Services, who spoke about Medicare/Medicaid and provided policy and legislative updates, and Victor Orija, the State of Delaware Long Term Care Ombudsman.

Paul Greenwood, Esq., who heads up elder abuse prosecutions for the San Diego District Attorney’s Office, recounted some of the more notorious cases he has prosecuted during his career.

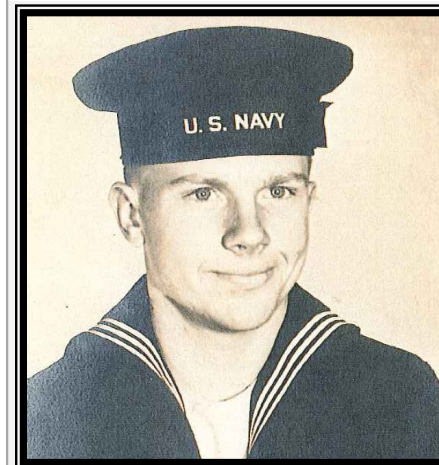


Greenwood suggested that greater vigilance is needed to assure that institutionalized seniors are protected from physical, emotional and financial exploitation.

“Age is an issue of mind over matter. If you don’t mind, it doesn’t matter.”
~ Mark Twain

SPOTLIGHT ON JAMES VINE

VOLUNTEER, WWII NAVY VETERAN



James Vine has a significant history of volunteering. In fact, in 1941, at the age of 16, he volunteered for the National Guard in his home state of California. It took the Guard 18 months, but they eventually figured out that he was underage and discharged him.

That didn’t slow him down, though. He immediately joined the Navy and was deployed twice to the Central Pacific.

In 1944, while on leave in Camden, NJ, Jim met his love, Susie, on a blind date. They married, had three sons and eventually six grandchildren and one great-grandson. They were parted last August when after 65 years of marriage, his beloved wife, Susie passed away.

Jim Vine has been an active volunteer in Gloucester County for the past 13 years. When asked why he became a volunteer with the Office of the Ombudsman back in 1999, Jim credited Susie. “In my declining years, I wanted to live up to the ideals of my wife, who was the quintessential giver.”

Jim says that what has kept him going as a long-term volunteer is that even though volunteering presents constant challenges, he can identify plenty of situations that would not have been resolved if it were not for his advocacy. Incidents range from pushing for a consult for a resident who had a growth on her face (which indeed turned out to be cancer) to empowering residents to speak up for themselves to ensuring that all residents are treated fairly and equitably.

When volunteering, Jim feels closer to Susie, who would have wanted him to continue his role as a volunteer advocate.

Jim’s advice to new volunteers: “First establish a positive relationship with the staff. That lets them know that you can relate to them in a way that they can trust you. They will help you do your job. But, you must always remember, “YOU ARE THERE FOR THE RESIDENT!”

LTC providers urged to utilize clinical assessment and intervention offered by S-COPE

In September, Ombudsman McCracken wrote a letter to all long-term care communities encouraging them to utilize the Statewide Clinical Outreach Program for the Elderly (S-COPE), a program developed by the NJ Division of Mental Health and Addiction Services (under the NJ Department of Human Services) and implemented by Trinitas Hospital. S-COPE is a program that has been designed specifically to provide specialized clinical consultation, assessment and intervention for older adults who have primary diagnoses of dementia with behavioral disturbances, and who are at risk of psychiatric hospitalization.

Its purpose is two-fold: to provide individual resident assessment before these situations reach a crisis point, and to provide education for facility staff to better handle these situations in the future. S-COPE representatives are available to provide assistance to LTC providers 24 hours a day, seven days a week, including holidays.

The Office of the Ombudsman for the Institutionalized Elderly (OOIE) fields many cases where elderly residents with dementia and/or mental illness have behavioral problems. Often we find that interventions could have occurred much earlier to minimize the serious disruption caused to the elderly resident, other residents of the facility, and facility staff.

S-COPE can be reached at 1-855-718-2699.

Spotlight on New Jersey’s Regional Ethics Committees:

Ocean Regional Ethics Committee (OREC) and Tri-Country Regional Ethics Committee (TREC)

This month, OOIE interviews Jane Knapp (Chair of TREC) and Margy Gosnell (Chair of OREC). Their respective Regional Ethics Committees operate under the auspices of the Ombudsman’s Office and provide guidance and consultation about difficult end-of-life issues in long-term care settings.

These two committed advocates share their perspectives on the important work these groups do to ensure that residents’ rights are respected at the end of life.

Q: Why are you interested in ethical issues in long-term care?

Margy: I believe very strongly in residents’ rights and in advocating for those who are not able to do so for themselves.

Jane: I saw firsthand how necessary ethics committees are when my family had to make the heart-wrenching decision about removing their loved one from a ventilator. It would have been so helpful if an ethics committee consultation had been recommended to help ease the guilt and misunderstanding surrounding that decision.

Q: How did you become involved in OREC/TREC?

Margy: I got involved when a member invited me to a meeting. I wanted to meet other health care professionals and discuss real issues of concern. I became the Chairman of OREC in 2012.

Jane: Seven years ago, the Membership Chair at that time invited me after learning of my interest in ethics. I served as the Education Chair for four years and as Recording Secretary and Interim Chairman before I took on the position of Chairman in 2010.

Q: Briefly describe your group’s mission.

Margy: To work collaboratively to protect residents’ rights, especially the right to make health care decisions, and to ensure the ethical integrity of the health care facility, their employees, and other persons providing healthcare.

Jane: The TREC mission is two-fold, to provide bio-ethical case consultations to the long-term care community when all attempts at in-house resolution have failed, and to provide education to the long-term care community.

Q: Describe a consult/advice/outreach your group provided that you felt was important or impactful.

Margy: Our group has participated in many consultations throughout the years. In each case, we provide important advice and support to the family and/or facility in crisis, ensuring that the decision/recommendation conforms to ethical standards and is consistent with relevant law.

Jane: One of the most memorable cases in TREC history involved a 24-year old man who, as a result of an accident, was a resident on a ventilator unit in a skilled nursing facility and was in a permanent vegetative state. The time came when the attending physician, the staff and his father felt it was time to let him go, but his mother just could not, resulting in great conflict not only within the family but among facility staff. Through case consultation, TREC took the time to discover who this young man was and how he would have wanted to live his life. Framed in this perspective, his mother was at peace with the recommendation to withdraw life support, as painful a decision as that was for the family and loved ones.

Ethical Decision Making: Perspectives and Practice

North Jersey

November 30, 2012
Daughters of Israel

1155 Pleasant Valley Way, West Orange, NJ, 07052

Central Jersey

December 10, 2012
CentraState Healthcare Systems
901 West Main Street, Freehold, NJ 07728

South Jersey

December 6, 2012
Atlanticare Regional Medical Center
1925 Pacific Avenue, Atlantic City, NJ 08401

9:30am to 4:00pm

Go to www.nj.gov/ooie for more information!

“And in the end, it's not the years in your life that count. It's the life in your years.”
~Abraham Lincoln

“I have yet to hear a member say that their TREC membership was not of value or not worth the time. We very much value each member; everyone has something very important to offer, lay person and clinical person alike. I would encourage every long-term care facility to participate in their local regional ethics committee.”

Q: How does your group benefit facility staff? Families? Residents?

Margy: When particular choices are difficult or controversial or a disagreement about optimal care exists, OREC provides support to professionals, staff, and families who experience difficulty making the best choice for their patient/resident/family member.

Jane: TREC helps facility staff when they are at an impasse with the family, or when there is disagreement on treatment among staff. We create a safe and non-judgmental environment for families to bring all their concerns to the table. Sometimes TREC is the only advocate a resident has if they no longer have capacity and there are no involved family members or a legal guardian. In these situations, we do our best to discover what the resident would have wanted, and if that cannot be determined, we help to guide what is in the resident’s best interest considering all the relevant factors.

Q: What are the biggest ethical issues you are seeing right now in long term care?

Margy: Many residents have no advance care planning documents to reflect what kind of treatment they would/would not want (no living will, no health care power of attorney, no do-not-resuscitate (DNR), do-not-intubate (DNI) or do-not hospitalize (DNH) orders). Serious ethical dilemmas arise when these elderly residents reach the end of their lives and no one knows what they would have wanted.

Jane: One huge problem is the default of the medical system to use every available medical intervention as a matter of course rather than explain other available care options. We also find that there has not been any advance care planning conversation or documents put in place to reflect what the resident wants.

Q: What is your hope for the future of your group? For the future of ethical decision making in long-term care in general?

Margy: My hope for OREC is that we have continued enthusiasm and a growing membership, and that more facilities get involved. With all the expected health care changes, the importance of OREC in supporting ethical issues in LTC will only grow. I want OREC to contribute to the health and well-being of our elderly population.

Jane: My hope is that TREC will continue to grow and have a greater importance in the long-term care community, especially as a resource for education. My wildest dream is that our role in the community would evolve to be to help provide advance health care planning for every long-term care resident so an ethics consultation is never needed! I also hope that every family who is struggling with such painful decisions will be offered the services of a trained and well-prepared ethics committee.

Q: Why should long-term care workers/facilities join RECs?

Margy: As a member of a Regional Ethics Committee, they can attend educational seminars and lectures and communicate with other ethics committees and health care providers. Participation greatly improves knowledge concerning ethical issues.

Jane: Building relationships with other colleagues has been invaluable for our TREC members. For instance, a member who is the sole social worker at his/her building now has a wider network of support and colleagues to offer advice on an internal issue. Often, cases do not need to go to formal consultation because members can offer insights and guidance resulting in an in-house resolution.

I have yet to hear a member say that their TREC membership was not of value or not worth the time. We very much value each member; everyone has something very important to offer, lay person and clinical person alike. I would encourage every long-term care facility to participate in their local regional ethics committee.

If you are interested in joining a Regional Ethics Committee, please contact the Chair of the group in your county: <http://nj.gov/ooie/pdf/EthicsCommitteeList.pdf>.

You can also contact Amy Brown at 609-826-5126

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